MTF Prescription Restriction Program

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MTF Prescription Restriction Process

1. **MTF providers identify beneficiary who may have "drug seeking behavior" or high risk of harming self or others**
2. **Use Pharmacy Data Transaction Service (PDTS) to set restriction**
3. **The provider has the option to:**
    1. **Restrict all meds to a specific pharmacy and/or provider**
    2. **Restrict controlled meds to a specific provider or list of providers**
    3. **Exclude controlled substances or specific non-controlled substance(s) at mail order or retail pharmacy**

- **The restriction form is available on the PEC website:**

https://rxnet.army.mil/pec/pdts/pdts_mtfs.php?submenuheader=0

MTF Rx Restriction Request Form

Fax this form to the DoD Pharmacy Operations Center (POC) at (210) 295-2567 or DSN 471-2567
To contact the POC dial 1-866-275-4732, option 8 Version 5.2

Restricted Beneficiary's Information

Is member assigned to a WTU:

Last Name: First Name: M.I.:

Birth Date : Sponsor's SSN :

Sole Provider Information

Reason for Request:

Member has been notified of restriction ☐ Effective Date :

Note Medical Management Team should re-evaluate restriction requirement for member six months after effective date. Send update notification to the POC at pdts.ameddcs@amedd.army.mil

To Be Completed by Provider

Site / Company:

Sole Provider Phone Number: Sole Provider Email:

Sole Provider Printed Name / Title: Sole Provider Signature: Date :

Nurse Case Manager Printed Name: Nurse Case Manager Phone Number :

Nurse Case Manger Email:

MTF Pharmacist Information

To Be Completed by Pharmacy

MTF RPh Phone Number : MTF RPh Email

MTF RPh Printed Name / Title: MTF RPh Signature: Date :

Type of Lock

Note: The lock will prevent the member from using their TRICARE benefits at the mail order pharmacy or a retail pharmacy.

○ Restrict **all meds** for a beneficiary to a specific pharmacy or list of pharmacies **and/or** providers or list of providers

Provider(s) Information:
Provider(s) DEA / NPI #:
Pharmacies Information:

○ Restrict **controlled meds** for a beneficiary to a specific provider or list of providers. Authorized Prescriber's printed name and DEA / NPI:

OR

○ Exclude controlled substances from a beneficiary or specific non-controlled substance(s).
Select Schedule (all that apply) ☐ II ☐ III ☐ IV ☐ V Other:

Print Form

Medication Restriction Program

- **MTF communicates to the POC which restriction type to manage pharmacy benefit**

- **Requires signature and coordination of the "Triad Team" comprised of the Provider, Nurse Case Manager, and the MTF Pharmacist**
  - Coordination between Triad Team and POC when SM is on leave or transfers for care

Civilian-Based Pharmacy Restriction Program

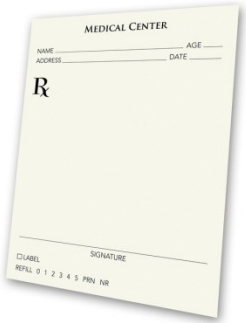
- AD Members assigned to CBWTU
- Community-based Pharmacy Restriction Form
  - Specific retail network pharmacy
  - Specific network provider

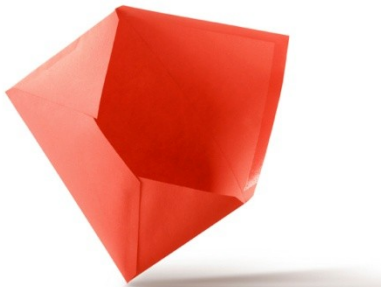
For Restriction Removal or temporary lift:

- Contact the POC at 1-866-275-4732 option 8 or send e-mail to: pdts.ameddcs@amedd.army.mil

Retail Medication Restriction Program (1-1-1)

- Express Scripts, Inc. (ESI) identifies members quarterly
- ESI sends data to Managed Care Support Contractor (MCSC) to examines medical & pharmacy claims to include / exclude in program
- ESI generates letters to members to select pharmacy, provider & medical facility
  - Letters not returned in 60 days or undeliverable are set at 100% Prepayment on all control meds
  - Member returns letter with selections
- ESI sends information to POC to enter selections in PDTS





PDTS: DRUG SEEKING BEHAVIOR (DSB) EDIT

What is the DSB edit?

The DSB edit is an overridable PDTS warning that is triggered by patient restrictions established through the MTF Prescription Restriction Program.

The MTF Prescription Restriction Program allows MTF providers the following options of restrictions:

- **All drugs restricted to specific pharmacy(s) and/or provider(s)**
- **Only Controlled meds restricted to a specific provider(s)**
- **Controlled meds or specific non-controlled meds restricted from mail order or retail pharmacy**

The process begins with the MTF provider or pharmacy and requires communication with the TMA Pharmacy Operations Center (POC).

Currently, PDTS does not provide rejection warnings to MTF providers or pharmacy staff when a claim adjudicates.

How Will the DSB Edit Work?

For patients with restrictions established through the MTF Prescription Restriction Program:

MTF:

- **PDTS will return a "warning" message to AHLTA and CHCS if an unauthorized provider and/or pharmacy attempts to prescribe/dispense a medication.**
- **DSB warnings at MTFs can be overridden by the provider and pharmacy**

Retail and Mail Order pharmacies:

- **If the restriction only allows medication(s) to be filled at a MTF(s), then Retail pharmacies and the Mail Order Pharmacy will receive rejections and the prescription will not process.**
- **DSB rejections at retail and mail order pharmacies can not be overridden by the pharmacy**

What Will the Rejection Warning Message Say?

Scenario: *Patient RESTRICTED to Pharmacy A only or Patient RESTRICTED to Pharmacy A for Medication Z Only*

PDTS WARNINGS

1. LOCKED-IN

ENTER WARNING # FOR DETAILS: 1

Conflict: LOCKED-IN

Additional Information:

PHARMACY NOT AUTHORIZED FOR THIS BENEFICIARY. PHARMACY ONLY! FOR QUESTIONS, CALL 1-866-275-4732 OR DSN (312) 471-8274 OPTION 8.

OVERRIDE WARNING (Y/N)? No//

AHLTA: Providers are presented with clinical reasons for not overriding the warning

The TMA POC toll free number is listed in the warning if detailed information on the restriction is required (e.g. the approved provider, pharmacy, etc).

VARIATIONS IN THE WARNING MESSAGE

Restriction (Locked into)	Message
Pharmacy	**PHARMACY NOT AUTHORIZED FOR THIS BENEFICIARY.** PHARMACY ONLY! FOR QUESTIONS, CALL 1-866-275-4732 OR DSN (312) 471-8274 OPTION 8.
Prescriber	**PRESCRIBER NOT AUTHORIZED FOR THIS BENEFICIARY. CALL 1-866-275-4732 ……**
Prescriber for certain drugs	**PRESCRIBER/DRUG NOT AUTHORIZED FOR THIS BENEFICIARY. CALL 1-866-275-4732 ……**
Locked-out of certain drugs (not able to obtain at any pharmacy through TRICARE)	**MEMBER/DRUG NOT AUTHORIZED FOR THIS BENEFICIARY. CALL 1-866-275-4732……**

What do I need to do?

To begin receiving DSB warnings:

- **MTFs do not have to do anything to begin receiving the DSB warnings.**

Impact on local processes:

- **MTFs should identify if and how the DSB edit fits into existing local sole provider and related processes.**

To restrict patients:

- **MTFs must go through the MTF Prescription Restriction process with the TMA POC to establish restrictions for specific patients. 1-866-275-4732 or DSN (312) 471-8274, option 8.**

To obtain details on an existing restriction that generated a DSB warning:

- **Contact the TMA POC at 1-866-275-4732 or DSN (312) 471-8274, option 8**

When and How will this be implemented?

CHCS and PDTS changes are required for implementation

CHCS:

- **The DSB edit is a part of CHCS Change Package (CP) 362 and was released on 2/21/11 and should be loaded with a regularly scheduled**
- **The CP must be loaded in order to receive DSB warnings.**

PDTS:

- **End of March: The DSB edit will be turned on for the sites currently participating in the MTF Prescription Restriction Program through coordination with the Service Consultants.**
- **The DSB edit will be turned on for all MTF sites after experience with the sites mentioned above.**

How do I learn more about the DSB Edit or MTF Prescription Restriction Program?

DSB Edit: Educational materials will be distributed and are available at (insert URL).

- **They will focus on the prescription restriction program and intended meaning of the warning messages**
- **They will not focus on incorporation into local processes**

MTF Prescription Restriction Program: Additional information is available at (insert URL).

Contact the TMA POC at 1-866-275-4732 OR DSN (312) 471-8274 OPTION 8